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## BIB DATA SHEET

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**APPLICANTS**

Fabrizio Dolfi, Valbonne, FRANCE;  
 Irina Safonova, Nice, FRANCE;

**\*\* CONTINUING DATA \*\*\*\*\***

This application is a 371 of PCT/FR05/00371 02/17/2005

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

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**\*\* IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\***

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Foreign Priority claimed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Met after Allowance	STATE OR COUNTRY	SHEETS DRAWINGS	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119(a-d) conditions met	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Initials	FRANCE	0	18	1

**ADDRESS**

OBLON, SPIVAK, MCCLELLAND MAIER & NEUSTADT, P.C.  
 1940 DUKE STREET  
 ALEXANDRIA, VA 22314  
 UNITED STATES

**TITLE**

Use Of Metronidazole For Preparing A Pharmaceutical Composition For Treating A Cutaneous Inflammation

<b>FILING FEE RECEIVED</b> 1030	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit